ARIZONA DEPARTMENT OF HEALTH SERVICES

AITIEON	A DEI AITIMEITI	OI TIERETTI OE	i i i i o Lo
STATE OF ARIZONA		CERTIFICATE NO.	-102-
County Of Maricopa) SS	DOCKET NO.	EMS 3054
pursuant to Department as a ground A		y requires the operation of MENT AMBULANCE SERVIC the State of Arizona for the transportation	E of individuals who are
and response times:	otherwise incapacitated or helpless within the The legal geographical boundarie		
2. Central Operat	ions Station: Page, Arizona (714	North Navajo).	
3. Response Times			
a. Eight (8) mir	nutes on fifty (50) percent of all ar	nbulance calls.	
	nutes on seventy (79) percent of all minutes on ninety (90) percent of	NO PERSONAL PROPERTY OF THE PARTY OF THE PAR	
	on one hundred (100) percent of a		
Now, therefore, and laws of the State of A	by virtue of the authority vested in the Arizona, does hereby grant this	Arizona Department of Health Services	s, under the constitution
	CERTIFICATE C	FNECESSITY	
authorizing the operation unless for cause sooner Department.	of the aforesaid ambulance service for amended, suspended, revoked or term	a period ending June 3 ninated subject to the decisions and o	
PROVIDED, that of Health Services.	t this certificate shall not be assigned r	nor transferred unless authorized by t	he Arizo na Department
10	BY THE OPPER OF	E TUE ADIZONA DEDADTMENT OF I	JEALTH CEDWICES IN
13/11/20	WITNESS WHERE	F THE ARIZONA DEPARTMENT OF H OF, I SUSAN GER	

<u>KANTANING TANING T</u>



to be affixed at Phoenix, Arizona on

the Director of the Arizona Department of Health Services, have hereunto set my hand and caused the official seal of the Arizona Department of Health Services

DIRECTOR

WITNESS WHEREOF, I